June 08, 2016

ATC Group Services
Attn: Mr. Robert Smith
46555 Humboldt, Suite 100
Novi, MI 48377

Project: HM-Off The Streets

Dear Mr. Robert Smith,

Enclosed is a copy of the laboratory report for the following work order(s) received by TriMatrix Laboratories:

Work Order	Received	Description
1605666	05/27/2016	680 Virginia Park

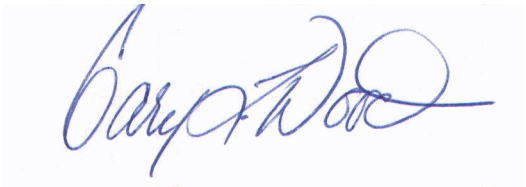
This report relates only to the sample(s) as received. Test results are in compliance with the requirements of the National Environmental Laboratory Accreditation Program (NELAP) and/or one of the following certification programs:

ANAB DoD-ELAP/ISO17025 (#ADE-1542); Arkansas DEP (#88-0730/13-049-0); Florida DEP (#E87622-24); Georgia EPD (#E87622-24); Illinois DEP (#200026/003329); Kentucky DEP (AL123065/#0021); Michigan DPH (#0034); Minnesota DPH (#491715); New York ELAP (#11776/53116); North Carolina DNRE (#659); Virginia DCLS (#460153/7952); Wisconsin DNR (#999472650); USDA Soil Import Permit (#P330-14-00305).

Any qualification or narration of results, including sample acceptance requirements and test exceptions to the above referenced programs, is presented in the Statement of Data Qualifications and Project Technical Narrative sections of this report. Estimates of analytical uncertainties and certification documents for the test results contained within this report are available upon request.

If you have any questions or require further information, please do not hesitate to contact me.

Sincerely,



Gary L. Wood
Project Chemist

5560 Corporate Exchange Court SE ♦ Grand Rapids, MI 49512 ♦ 616.975.4500 ♦ Fax 616.942.7463 ♦ www.trimatrixlabs.com

PROJECT TECHNICAL NARRATIVE(s)

No Project Narrative is associated with this report.

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STATEMENT OF DATA QUALIFICATIONS

All analyses have been validated and comply with our Quality Control Program.
No Qualification is required.

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TRIMATRIX LABORATORIES

ANALYTICAL REPORT

Client:	**ATC Group Services**	Work Order:	**1605666**
Project:	HM-Off The Streets	Description:	680 Virginia Park
Client Sample ID:	**1-BSU-P-OS/ Bathroom Sink**	Sampled:	05/25/16 04:59
Lab Sample ID:	**1605666-01**	Sampled By:	ATC
Matrix:	Drinking Water	Received:	05/27/16 16:45

Metals in Drinking Water by EPA 200 Series Methods

Analyte	Analytical Result	RL	Action Limit	Unit	Dilution Factor	Method	Date Time Analyzed	By	QC Batch
Lead	<0.0010	0.0010	0.015	mg/L	1	USEPA-200.8 Rev. 5.4	06/07/16 10:07	DSC	1605652

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TRIMATRIX LABORATORIES

ANALYTICAL REPORT

Client:	**ATC Group Services**	Work Order:	**1605666**
Project:	HM-Off The Streets	Description:	680 Virginia Park
Client Sample ID:	**2-KSU-P-OS/ Kitchen Sink**	Sampled:	05/25/16 05:02
Lab Sample ID:	**1605666-03**	Sampled By:	ATC
Matrix:	Drinking Water	Received:	05/27/16 16:45

Metals in Drinking Water by EPA 200 Series Methods

Analyte	Analytical Result	RL	Action Limit	Unit	Dilution Factor	Method	Date Time Analyzed	By	QC Batch
Lead	<0.0010	0.0010	0.015	mg/L	1	USEPA-200.8 Rev. 5.4	06/07/16 10:10	DSC	1605652

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TRIMATRIX LABORATORIES

ANALYTICAL REPORT

Client:	**ATC Group Services**	Work Order:	**1605666**
Project:	HM-Off The Streets	Description:	680 Virginia Park
Client Sample ID:	**3-BSU-P-OS/Bathroom Sink**	Sampled:	05/25/16 05:05
Lab Sample ID:	**1605666-05**	Sampled By:	ATC
Matrix:	Drinking Water	Received:	05/27/16 16:45

Metals in Drinking Water by EPA 200 Series Methods

Analyte	Analytical Result	RL	Action Limit	Unit	Dilution Factor	Method	Date Time Analyzed	By	QC Batch
Lead	<0.0010	0.0010	0.015	mg/L	1	USEPA-200.8 Rev. 5.4	06/07/16 10:13	DSC	1605652

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TRIMATRIX LABORATORIES

QUALITY CONTROL REPORT

Metals in Drinking Water by EPA 200 Series Methods

QC Type	Sample Conc.	Spike Qty.	Result	Unit	Spike % Rec.	Control Limits	RPD	RPD Limits	RL
Analyte: **Lead**/USEPA-200.8 Rev. 5.4									
QC Batch: 1605652 (Metals Direct Analysis)							Analyzed: 06/07/2016		By: DSC
Method Blank			<0.0010	mg/L					0.0010
Laboratory Control Sample		0.0400	**0.0386**	mg/L	96	85-115			0.0010

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TRIMATRIX LABORATORIES

PRETREATMENT SUMMARY PAGE

Client: **ATC Group Services**
Project: **HM-Off The Streets**

Pretreatment	Lab Sample ID	Batch	By	Date & Time Prepared
USEPA 600/R-94/173	1605666-01	1605652	LNS	06/02/16 08:15
	1605666-03	1605652	LNS	06/02/16 08:15
	1605666-05	1605652	LNS	06/02/16 08:15

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ADK

TRIMATRIX LABORATORIES

Chain of Custody Record

COC No. 160538292

5560 Corporate Exchange Court SE, Grand Rapids, MI 49512
Phone (616) 975-4500 Fax (616) 942-7463 www.trimatrixlabs.com

Pg. 1 of 1

For Lab Use Only
Cart 13
VOA Rack/Tray -
Receipt Log No. 3-20
Project Chemist Jim McFadden
Work Order No. 160516606

Client Name: ATC Group Services, LLC
Address: 46555 Humboldt Drive Suite 100
City, State Zip: Novi, Michigan 48377
Phone: 248-669-5140 Fax 248-669-5147
Email: robert.smith@atcassociates.net

Project Name: HM-Off The Streets 680 Virginia Park
Client Project No. / P.O. No.
Invoice To: ☑ Client ☐ Other (comments)
Contact/Report To: Robert Smith

Analyses Requested

Container Type (corresponds to Container Packing List)

PRESERVATIVES
A NONE pH~7
B HNO_3 pH<2
C H_2SO_4 pH<2
D 1+1 HCl pH<2
E NaOH pH>12
F ZnAc/NaOH pH>9
G MeOH
H Other (note below)

Schedule	Matrix Code	Sample Number		Field Sample ID	Cooler ID	Sample Date	Sample Time	COMP	GRAB	Matrix	Lead - Primary (P)	Lead - Flush (F) - Hold	Total	Sample Comments
				Number of Containers Submitted										
01		01	1	1-BSU-P-OS/ Bathroom Sink	TM2531	5/25/16	459		x		X		1	Unisex Bathroom @ Stairs
02		02	2	1-BSU-F-OS/Bathroom Sink		5/25/16	500		x			X	1	Unisex Bathroom @ Stairs
01		03	3	2-KSU-P-OS/Kitchen Sink		5/25/16	502		x		X		1	Kitchen Sink 1st floor
02		04	4	2-KSU-F-OS/Kitchen Sink		5/25/16	503		x			X	1	Kitchen Sink 1st floor
01		05	5	3-BSU-P-OS/Bathroom Sink		5/25/16	505		x		X		1	Unisex Bathroom @ Stairs 2nd
02		06	6	3-BSU-F-OS/Bathroom Sink		5/25/16	506		x			X	1	Unisex Bathroom @ Stairs 2nd
			7											
			8											
			9											
			10											

Sampled By (print) Andrew Ketchum
Sampler's Signature
Company: ATC Group Services LLC, 46555 Humboldt Dr. Ste 100, Novi, MI 48377

How Shipped? Hand ____ Carrier ____
Tracking No.

Comments: If lead is above detection limits, please analyze flush samples

1. Relinquished By	Date	Time	2. Relinquished By	Date	Time	3. Relinquished By	Date	Time
	5/26/16	1419	Ray Johnson	5/27/16	1645			
1. Received By	Date	Time	2. Received By	Date	Time	3. Received For Lab By	Date	Time
Ray Johnson	5/27/16	1240				J. Rardin	5/27/16	16

ORIGINAL - LABORATORY COPY - SAMPLER

SAMPLE RECEIVING / LOG-IN CHECKLIST

TRIMATRIX LABORATORIES

Client: GTC GROUP	Work Order #: 1605666	New / Add To
Receipt Record Page/Line #: 3-20	Project Chemist: JDM	Sample #s: 01-06

Recorded by (initials/date)		Qty Received	Thermometer Used	
DN 5/27/16	☑ Cooler ☐ Box ☐ Other	1	☑ IR Gun (#202) ☐ Digital Thermometer (#54) ☐ Other (#____)	☐ See Additional Cooler Information Form

Cooler # 772531 **Time** 1839

Custody Seals: ☑ None ☐ Present / Intact ☐ Present / Not Intact

Coolant Type: ☐ Loose Ice ☐ Bagged Ice ☐ Blue Ice ☑ None

Coolant Location: Dispersed / Top / Middle / Bottom

Temp Blank Present: ☐ Yes ☐ No

If Present, Temperature Blank Location is: ☐ Representative ☐ Not Representative

	Observed °C	Correction Factor °C	Actual °C
Temp Blank			
Sample 1	25.7	0	25.7
Sample 2	24.6	0	24.6
Sample 3	24.4	0	24.4

3 Sample Average °C: 24.9

☐ Cooler ID on COC?
☐ VOC Trip Blank received?

(Three additional blank cooler sections: Cooler #, Time, Custody Seals: ☐ None ☐ Present / Intact ☐ Present / Not Intact; Coolant Type: ☐ Loose Ice ☐ Bagged Ice ☐ Blue Ice ☐ None; Coolant Location: Dispersed / Top / Middle / Bottom; Temp Blank Present: ☐ Yes ☐ No; If Present, Temperature Blank Location is: ☐ Representative ☐ Not Representative; Observed °C / Correction Factor °C / Actual °C for Temp Blank, Sample 1, Sample 2, Sample 3; 3 Sample Average °C:; ☐ Cooler ID on COC? ☐ VOC Trip Blank received?)

If any shaded areas checked, complete Sample Receiving Non-Conformance and/or Inventory Form

Paperwork Received

Yes	No	
☑	☐	Chain of Custody record(s)? If No, Initiated By ______
☑		Received for Lab Signed/Date/Time?
☐	☑	Shipping document?
☐	☑	Other ______

COC Information

☑ TriMatrix COC ☐ Other ______

COC ID Numbers: 16053829 2

Check Sample Preservation

N/A	Yes	No	
	☑	☐	Temperature Blank OR average sample temperature, ≥6° C?
☐	☐	☑	If either is ≥6° C, was thermal preservation required?
☑	☐		If "Yes", Project Chemist Approval Initials: ______
☑	☐		If "Yes" Completed Non Con Cooler - Cont Inventory Form?
☐	☑		Completed Sample Preservation Verification Form?
☐	☑	☐	Samples chemically preserved correctly?
☑	☐		If "No", added orange tag?
	☐	☑	Received pre-preserved VOC soils? ☐ MeOH ☐ Na_2SO_4

Check COC for Accuracy

Yes	No	
☑	☐	Analysis Requested?
☑	☐	Sample ID matches COC?
☑	☐	Sample Date and Time matches COC?
☑		Container type completed on COC?
☑	☐	All container types indicated are received?

Check for Short Hold-Time Prep/Analyses

☐ Bacteriological
☐ Air Bags
☐ EnCores / Methanol Pre-Preserved
☐ Formaldehyde/Aldehyde
☐ Green-tagged containers
☐ Yellow/White-tagged 1 L ambers (SV Prep-Lab)

AFTER HOURS ONLY:
COPIES OF COC TO LAB AREA(S)
☑ NONE RECEIVED
☐ RECEIVED, COCs TO LAB(S)

Sample Condition Summary

N/A	Yes	No	
	☐	☑	Broken containers/lids?
	☐	☑	Missing or incomplete labels?
	☐	☑	Illegible information on labels?
	☐	☑	Low volume received?
	☐	☑	Inappropriate or non-TriMatrix containers received?
☑	☐	☐	VOC vials / TOX containers have headspace?
☑	☐	☐	Extra sample locations / containers not listed on COC?

Notes

☐ Trip Blank received ☐ Trip Blank not listed on COC

Cooler Received (Date/Time)	Paperwork Delivered (Date/Time)	≤1 Hour Goal Met?
DN 5/27/16	5/27/16	Yes / No

TRIMATRIX LABORATORIES — SAMPLE PRESERVATION VERIFICATION FORM

Client	CJC	Work Order #	1605666
Receipt Log #	3-20	Completed By (initials/date)	JN 5/27/16
		Project Chemist	JDK

COC ID # 160538292 — Adjusted by: ____ Date: ____

Container Type	5 / 23	4	13		DO NOT ADJUST pH FOR THESE CONTAINER TYPES: 6	15		
Tag Color	Lt. Blue	Blue	Brown		Red	Red Stripe		
Preservative	NaOH	H_2SO_4	H_2SO_4		HNO_3	HNO_3		
Expected pH	>12	<2	<2		<2	<2		
COC Line #1					✓			
COC Line #2					✓			
COC Line #3					✓			
COC Line #4					✓			
COC Line #5					✓			
COC Line #6					✓			
COC Line #7								
COC Line #8								
COC Line #9								
COC Line #10								

Comments

COC ID # ____ Adjusted by: ____ Date: ____

Container Type	5 / 23	4	13		DO NOT ADJUST pH FOR THESE CONTAINER TYPES: 6	15		
Tag Color	Lt. Blue	Blue	Brown		Red	Red Stripe		
Preservative	NaOH	H_2SO_4	H_2SO_4		HNO_3	HNO_3		
Expected pH	>12	<2	<2		<2	<2		
COC Line #1								
COC Line #2								
COC Line #3								
COC Line #4								
COC Line #5								
COC Line #6								
COC Line #7								
COC Line #8								
COC Line #9								
COC Line #10								

Comments

pH Strip Reagent #

☑ 6040263

☐ ____

Aqueous Samples: For each sample and container type, check the box if pH is acceptable. If pH is not acceptable for any sample container, record pH in box, and note on Sample Receiving Checklist and on Sample Receiving Non-Conformance Form. If approved by Project Chemist, add acid or base to the sample to achieve the correct pH. Add up to, but do not exceed 2x the volume initially added at container prep (see table below for initial volumes used). Add orange pH tag to sample container and record information requested. Record adjusted pH on this form. Do not adjust pH for container types 6 and 15.

Container Size (mL)	Original Vol. of Preservative (mL)
Container Type 5	NaOH
500	2.5
1000	5.0
Container Type 4	H_2SO_4
125	0.5
250	1.0
500	2.0
1000	4.0
Container Type 13	H_2SO_4
500	2.5